

STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

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OCT 17 2017

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NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyis	st(s) Debra V	anderbeek, Robei	rt Clegg, Periklis Karoutas, Le	ann Moccia
II. Name of lobbyis	st's partnership, firm o	r corporation, if a	ny:	÷
Leg	gislative Solutions, L.L.	C.		
	Jame of partnership, firm or			
!	P.O. Box 10724	Bedford	NH	03110
Business Address: ((Street)	(Town/City)	(State)	(Zip Code)
() 603-986-93	145)	e-mail dbeek@ac	ol.com
(Telephone	145 ((Fax))	
reportable expense	transactions which are	e not attributable i		
□ An reportable tr	-	ustry for a Sound I	the reporting date relative to the	e tonowing chem.
	<u> </u>	<u> </u>	bbyist Registration Form)	
<u>OR</u>			· · ·	
☐ All reportable tra unrelated to any par	•	st (including the lob	byist's family), or the lobbying	firm listed below which
IV. Date of Report	April 26, 2017 April 26, 2017 ditivity from date of registra	tion to 2/21/17	July 26, 2017 activity from 4/1/17 to 6/30/17	i
Reports cover: ac	October 25, 2017		January 31, 2018	
	activity from 7/1/17 to 9		activity from 10/1/17 to 12/31/	17
If this box is checke Concord, NH 03301 VI. Check if additi If you have rece If you have paid Expense Reimburse	d, complete just this form onal reports are attach eived fees or made exper d an honorarium or reiml ment	ed: nditures, you must foursed expenses, you	transactions made since the Secretary of State's Office, Some Secretary of	ente House, Room 204, expenses port of Honorariums or
I have read RSA 15	best of my knowledge a	and RSA 664 and h	ereby swear or affirm that the f	oregoing information is to

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STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

II. Name of lobbyist's partnership, firm or corporation, if any:	
Legislative Solutions, L.L.C.	
(Name of partnership, firm or corporation)	
III. Name of Client Responsible Industry for a Sound Environment	Date October 13, 2017
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, governmen including research, monitoring legislation, and related legal work. The gr reduced by any expenses:	t relations, or public relations service
a) Total of all fees received in this reporting period	a) \$ 4500.00
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar y	b) \$9000.00 /ear)
c) Total of all fees received to date (Add lines a and b)	c) \$ <u>13,500.00</u>
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$ <u>0</u>
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to re fees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office expenditure was of \$25.00 or less (for examplunch where the cost was \$25.00 or less, purchase of a pen with a value of being lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this repany purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value great restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made be may be filed for the lobbyist(s)/firm the aggregate total of all expenses pair expenses; (b) the aggregate total of a ble: meals purchased during a businesses than \$10 that is given to the person and the value of \$25.00 or less); an orting period of greater than \$25.00 for the period of greater than \$25.00 for the period of greater than \$25, purchase of the than \$25, but not greater than \$56, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$ 4500.00
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$ <u>0</u>
c) Total of all itemized expenditures reported in detail in section VI.	c) \$ 0

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$ 4500.00
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$ 9000.00
f) Total of all expenses year to date	f) \$ <u>13,500.00</u>
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from loperiod, including by whom paid or to whom charged.	bbying fees during this reporting :
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
••••	
Sworn Statement/Affirmation by Lobbyist	•
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm	n that the foregoing information
is true and complete to the best of my knowledge and belief.	
	October 13, 2017
(Signature of lobbyist)	(Date)
Debra Vanderbeek	
(Print Name of lobbyist)	

:

,

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Income and Expense Statements and related Addendums.

Name of Lobbying par	rtnership, firm, or corpo	oration: Legislative Solutio	ns	
		or the partnership, firm, or		t related to any
particular client):				
Date of Report (check	one):			
April 26, 2017 □	July 26, 2017 □	October 25, 2017 💆	January 31, 201	8 □:
		ne Statement of Income ar at Statement (insert the n	-	
X Addendum A(s).			
Addendum B(s).			
Addendum C(s).			
complete to the best of	f my knowledge and be		ber 13, 2017	um is true and
(Signature of lobbyist)			(Date)	;
Robert Clegg				
(Print Name of Jobbyi	et)			

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyis	t
Statement of Income and Expenses for:	

NI CI 11 .		Logislativa Co	hlutions
Name of Lobbying parti	•		
		• • • • • • • • • • • • • • • • • • • •	corporation and not related to any
particular client):			
Date of Report (check o	one):		
April 26, 2017 □	July 26, 2017 □	October 25, 2017 🗖	January 31, 2018 □
			d Expenses described above, and imber of Addendum forms being
Addendum A(s)	i.		
Addendum B(s)	•		
Addendum C(s)			
I hereby swear or affirm complete to the best of			nt and each Addendum is true and
///		Octo	per 13, 2017
(Signature of lobbyist)			(Date)
			:
Periklis Karoutas			
(Print Name of Johnvist)	\		

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn	Stater	nent/Aff	irma	tion	by L	obbyist
Statem	ent of	Income	and	Expe	nses	for:

Name of Lobbying part	nership, firm, or corp	oration: Legislative S	olutions
Name of Client (leave by particular client):	olank if Statement is f	or the partnership, firm, or	corporation and not related to an
Date of Report (check o	one):		
April 26, 2017 □	July 26, 2017 🗆	October 25, 2017	January 31, 2018 □
			nd Expenses described above, and umber of Addendum forms being
Addendum A(s).		
Addendum B(s)).		
Addendum C(s)).		
I hereby swear or affirm complete to the best of (Signature of lobbyist)		elief.	nt and each Addendum is true and ber 13, 2017 (Date)
(Signature of lobbyist)			(Date)
Leann Moccia			
(Print Name of lobbyist)		